

Donation Form

Please return this form with your payment.

Parent(s) Name:					
Email Address:					
Phone Number:					
Student's Name		Grade	Teacher		Room #
*Donations are on a per student basis. If this donation will be split evenly between multiple students, incentive prizes will be based on the per student donation amount.					
Donation Amount:			\$		
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Please make **checks payable to POWW** and return to the office between 8am and 3pm on school days.